



TRANSMITTAL FORM

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Number of Pages in This Submission 7

Application Number 09/182,911

Filing Date October 30, 1998

First Named Inventor Barry G. Wilks

Group Art Unit 2774

Examiner Name J. Lesperance

Attorney Docket Number 0100.990083 (0100.01269)

- ENCLOSURES (check all that apply)**
- | | | |
|--|--|--|
| <input type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Assignment Papers (for an Application) | <input type="checkbox"/> After Allowance Communication to Group |
| <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input checked="" type="checkbox"/> Amendment / Response | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> To Convert a Provisional Application | <input type="checkbox"/> Status Letter |
| <input checked="" type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address | <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Terminal Disclaimer | Check for \$110 Return postcard |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Small Entity Statement | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> Request for Refund | |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application | | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm name	Markison & Reckamp, P.C. P.O. Box 06229 Wacker Drive Chicago, Illinois 60606-0229 Telephone: 312-939-9800 Facsimile: 312-939-9828				
Signature	<i>John R. Garrett</i>				
Individual Name	John R. Garrett	Reg. No.	27,888	Date	8/1/00

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: 7/31/00

Typed or printed name	Rosalie Swanson			
Signature	<i>Rosalie Swanson</i>	Date	8/1/00	

SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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